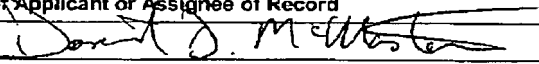


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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/065279
	Filing Date	September 30, 2002
	First Named Inventor	Leung, Jeffrey C.
	Confirmation No.	5693
	Attorney Docket Number	2284.40533

I hereby revoke all previous powers of attorney given in the above-identified application.					
<input type="checkbox"/> A Power of Attorney is submitted herewith.					
OR					
<input checked="" type="checkbox"/> I hereby appoint the practitioner(s) associated with the following Customer Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith: 83532					
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<input type="checkbox"/> Applicant/Inventor.					
<input type="checkbox"/> Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).					
<input checked="" type="checkbox"/> As assignee of record of the entire interest I/we hereby elect, under 37 CFR 3.71, to prosecute the application to the exclusion of the inventor(s).					
SIGNATURE of Applicant or Assignee of Record					
Signature				Date	December 12, 2008
Name		David D. McMasters			
Title and Company (Assignee)		President and CEO Quill Medical, Inc.			
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.					
*Total of forms are submitted.					

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